## NI OFN OF COP. S RECEIVED CISTRIBUTION SA., A FF FILE U.S. G. S. LAND OFFICE TRANSPORTER GAS PRORATION OFFICE

## NEW MEXICO OIL CONSERVATION COMMISSION Santa Fe, New Mexico

(Form C-104) Revised 7/1/57

## REQUEST FOR (OIL) - (GAS) ALLOWAPLE

New Well Recompletion

This form shall be submitted by the operator before an initial allowable will be assigned to any completed Oil or Gas well. Form C-104 is to be submitted in QUADRUPLICATE to the same District Office to which Form C-101 was sent. The allowable will be assigned effective 7:00 A.M. on date of completion or recompletion, provided this form is filed during calendar month of completion or recompletion. The completion date shall be that date in the case of an oil well when new oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

d into	the st	ock tank	s. Gas mus	st be reported o	on 15.025 psia a	Midland,	it. <b>Cexas</b>	March 24	, 1964
					• • •	(Place)			(Date)
ARE	HER	EBY RE	QUESTI	NG AN ALLO	WABLE FOR	A WELL KN	IOWN AS:	s.w.	S.W.
	ter i	Promici	ng Comp	and - Legar	(Leas)	, Well No.	<b>*B* 1</b> in		·/
M	Compai	ny or Ope	<b>21</b>	т <b>8-8</b>	<sub>D</sub> 36-3	NMPM	Undesignated		P~
Unit	Letter								1
Roc	20070.	<u> </u>		County. Da	te Spudded	:-(-e)	Date Drilling Go	mpleted	12,100
Pl	lease in	ndicate lo	cation:	Elevation	12,0531	lotal	of Prod. Form.	toka Ser	×d.
D	С	В	A			Mame	of Fioe: Form.		
				PRODUCING IN	12,057'	to 12.0821			
E	F	G	H	Perforations		Depth	ng Shoe 12,300'	Depth	11.972'
				Open Hole		Casi:	ng Shoe	Tubing	
L	K	J	I	OIL WELL TES					Choke
-	••					_	bbls water in		
<del>.</del>							er recovery of volume		Choke
M,	N	0	P	load oil use	ed):bb	ls,oil,	bbls water in	hrs,	min. Size
				GAS WELL TES	<u>st</u> -				
				_ Natural Proc	d. Test:	MCF/	Day; Hours flowed	Choke	Size
ıbing ,	Casing	TAGE) and Geme	nting Reco	rd Method of Te	esting (pitot, b	ack pressure, e	tc.):		
Size		Feet	Sax	Test After	Acid or Fracture	Treatment:	1,420 MCF,	Day; Hours	flowed
13-3	/81	4231	100	Choke Size	24/64" Method	cf Testing:	Orifice Neter	<del></del>	
				Asid or Frac	cture_Treatment	(Give amounts of	materials used, suc	h_as_acid	water, oil, and
9-5/	8* 1	1,332'	2043				materials used, suc		g gong
<b>7"</b> 0	.D. 5	,769	500	Casing Pag	ker Tubing 24	Old Date first	t new Narch ]	7, 1964	
Line				Oil Transpor					
<u>¾"</u>	2	2,824'	150	Gas Transpor					
2-3/	5:]	11,972	Q	OR 18,981/1					
					•••••••••••••••				••••••
									*****************
						and complete to	o the best of my known or Producing Co	wiedge.	
prove	ed		, la		, 19	1	Company or C		,
	OII .	CONSE	RVATIO	N COMMISSI	ON	Ву:	bly 6.	reflect	· Ca
						Patn	(Signatural Color Signatural Color Signatura Color Signa	ne.Y	
نيسو:۱	-2(	<u> </u>		Uni	<u> </u>	TitleSen	d Communications	regarding w	vell to:
tle		<u>)</u>				Name	J. Sneed, Lone	Star Pro	oducing Con
JI			· · · · · · · · · · · · · · · · · · ·		****		r 1815. Hdlan	i. Texas	79702